

PTO/SB/30 (10-01)

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**REQUEST
FOR
CONTINUED EXAMINATION (RCE)
TRANSMITTAL**

Address to:
MS RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Application Number	09/622,089
Filing date	August 10, 2000
First Named Inventor	Nomoto
Art Unit	1764
Examiner Name	Alexa A. Doroshenk
Attorney Docket Number	490042-87

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application.

Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

1. Submission required under 37 CFR 1.114

- a. Previously submitted
 - i. Consider the amendment(s)/reply under 37 CFR 1.116 previously filed on _____. (Any unentered amendment(s) referred to above will be entered).
 - ii. Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____.
- b. Enclosed
 - i. Amendment(s)/Reply
 - ii. Affidavit(s)/Declaration(s)
 - iii. Information Disclosure Statement (IDS)
 - iv. Other _____

2. Miscellaneous

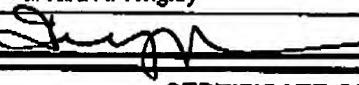
- a. Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of _____ months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(l) required)
- b. Other _____

3. Fees The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed.

- a. The Director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No. 50-1901.
 - i. RCE fee required under 37 CFR 1.17(e) – Large Entity Fee \$790.
 - ii. Extension of time fee (37 CFR 1.136 and 1.17) – Large Entity Fee \$_____.
 - iii. Other _____.
- b. Check in the amount of \$_____ enclosed.
- c. Payment by credit card (Form PTO-2038 enclosed)

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

Name (Print/Type)	Barbara A. Wrigley	Registration No. (Attorney/Agent)	34,950
Signature		Date:	April 11, 2005

CERTIFICATE OF MAILING OR TRANSMISSION

I hereby certify under 37 CFR 1.8 that this correspondence is being facsimile transmitted to the MS RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, facsimile number (703) 872-9306 on the date shown below.

Name (Print/Type)	Brea K. Taken	Date:	April 11, 2005
Signature			